ATTORNE	CKET NO.	10011155-1
		10011100-1

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

		nt Sensor Areas				
the specification of which is at	tached hereto unless th	e following box is che	ecked:			
() was filed on and v						
I hereby state that I have revincluding the claims, as amen disclose all information which is	ded by any amendmen	t(s) referred to above	 e. I acknowledge the duty t 			
Foreign Application(s) and/or Claim of	Foreign Priority					
I hereby claim foreign priority benefits inventor(s) certificate listed below and filing date before that of the application	have also identified below a	ny foreign application for p	any foreign application(s) for patent atent or inventor(s) certificate having			
COUNTRY	APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMEO UNOER 35 U.S.C. 119			
-			YES: NO:			
			YES: NO:			
Provisional Application						
hereby claim the benefit under Title below:	35, United States Code Sec	tion 119(e) of any United	States provisional application(s) liste			
) AP	PLICATION SERIAL NUMBER	FILING OATE	\neg			
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information as defined in Title 37, Coo application and the national or PCT into APPLICATION SERIAL NUMBER	de of Federal Regulations, Se ernational filing date of this a FILING DATE	pplication:	red between the filing date of the pri			
09/430471	Oct-29-1999	Pending				
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POWER OF ATTORNEY: As a named inventor, I hereby appo						
business in the Patent and Trademark) and/or agent(s) to prose	ecute this application and transact			
business in the Patent and Trademark Customer Number	Office connected therewith:	Place Customer Number Bar Code Label here	ecute this application and transact a			
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Customer Number	Office connected therewith:	Place Customer Number Bar Code Label here	Calls To:			
Customer Number Send Correspondence to: HEWLETT-PACKARD COMPANY Intellectual Property Administratior P.O. Box 272400	Office connected therewith:	Place Customer Number Bar Code Label here Direct Telephone	Calls To:			
Customer Number Send Correspondence to: HEWLETT-PACKARD COMPANY Intellectual Property Administration	Office connected therewith: 022879 0 0 ments made herein of if are believed to be true attements and the light Title 18 of the Uniter	Place Customer Number Bar Code Lisbel have Direct Telephone Augustus W Win (1970) 898-3142 my own knowledge a e; and further that the like so made are punis d States Code and th	Calls To: field ire true and that all statemen ses statements were made with shable by fine or imprisonmer			
Customer Number Send Correspondence to: HEWLETT-PACKARD COMPANY Intellectual Property Administratior P.O. Box 272400 Fort Collins, Colorado 80527-240 I hereby declare that all stater made on information and belie the knowledge that willful fals or both, under Section 1001 c may jeopardize the validity of t	Office connected therewith: 022879 0 0 ments made herein of if are believed to be true attements and the light Title 18 of the Unite the application or any position.	Place Customer Number Bar Code Lisbel have Direct Telephone Augustus W Win (1970) 898-3142 my own knowledge a e; and further that the like so made are punis d States Code and th	Calls To: field are true and that all statemen ses statements were made wi shable by fine or imprisonmer at such willful false statemen			
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DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (minued)

ATTORNEY DOCKET NO. 10011155-1

	Full Name of # 2 joint Inventor:	Edward S Beeman		Citizenship: US
	Residence:	33766 Cliff Rd Windsor CO 80550		
	Post Office Address:	Same as residence		
	Choren St	See	2	4 January, 2001
	Inventor's Signature	Di	ate	
	Full Name of # 3 joint inventor:			Citizenship:
-	Residence:			·
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D	Full Name of # 5 joint inventor	:		Citizenship:
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	Full Name of # 6 joint inventor	:		Citizenship:
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	Full Name of # 7 Joint Inventor	·		Citizenship:
	Residence:			- Constitution of the cons
	Post Office Address:			
	Post Office Address:			
	Inventor's Signature		Date	
	Full Name of # 8 joint inventor	:		Citizenship:
	Residence:			
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	inventor's orginature		Date	